

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|---------|
| FEE DETERMINATION | JL | 20 | 9/23/03 |
| O.I.P.E. CLASSIFIER | | | 9/23/03 |
| FORMALITY REVIEW | | | |
| RESPONSE FORMALITY REVIEW | JB | W303 | 11-10 |

INDEX OF CLAIMS

☒ Rejected
☒ Allowed
☒ (Through numeral) Canceled
☒ Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Best Available Copy

APPLICATION
09/6

APPLICANTS

TITLE

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Form PTO-43
(Rev. 6/99)

| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions
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